MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

10/582251

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/				51						
2		/		/			52						
3		3		/			53						
4		4		/			54						
5		5		/			55						
6		6		/			56						
7		7		/.			57						
8		8					58						
9	/		/				59						
10		/		/			60						
11°		10					61						
12		12					62						
13		6		/			63						
14							64						
15							65						
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42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	2	⇓	2	⇓		⇓	TOTAL IND.		⇓		⇓		⇓
TOTAL DEP.	13	⇐	11	⇐		⇐	TOTAL DEP.		⇐		⇐		⇐
TOTAL CLAIMS	15		13				TOTAL CLAIMS						